PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/854924

CLAIMS AS FILED - PAR					ΓI			SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		1	TYPE		OR	SMALL ENTITY		
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			26 minus 20=		. 6			X\$ 9=		OR	X\$18=	108	
INDEPENDENT CLAIMS			2 minus 3 =		*			X40=		OR	X80=		
MU	LTIPLE DEPEN	RESENT	SENT				+135=		OR	+270=			
* If	the difference	in column 1 is	ess than zero, enter "0" in colun			olumn 2	ļ	TOTAL		OR	TOTAL	818	
CLAIMS AS AMENDED - PART II								'		-	OTHER	THAN	
		(Column 1)	(Column 2) (Co			(Column 3)		SMALL I	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X40=		OR	X80=	a taran da ang	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
								TOTAL			TOTAL		
								ADDIT. FEE		OR	ADDIT. FEE		
		(Column 1)			mn 2)	(Column 3)	•						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDN	Total		Minus	**	•	=		X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF M	Minus	***	T CLAIM	=		X40=		OR	X80=		
<u> </u>	FIRST PRESE	INTATION OF M	OLITPLE DEP	ENDEN	CLAIIVI		J	+135=		OR	+270=		
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	·	
•		(Column 1)		(Colu	mn 2)	(Column 3))				4.1		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=]	X40=			X80=		
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		J ŀ			OR			
	If the entry in sale	ump 1 is less than t	the entry in eat-		20 "O" in an	lumn 2		+135=		OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		nher Previously Pa					er fou	nd in the and	propriate hos	cin col	umn 1		